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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 MAR 11 AM 11:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 3/15/11



March 8, 2011

Florida Department of State  
New Filings Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re:    *Application for Authorization to Transact Business in Florida***

Dear Sir or Madam:

Risk Management Associates, Inc. respectfully submits the following in support of its application for authorization to transact business in Florida:

1. New Filing Cover Letter;
2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. North Carolina Certificate of Existence;
4. Resolution of the Board of Directors to Adopt an Alternate Name for use in Florida; and
5. Check number 8479 in the amount of \$70.00 as a filing fee.

Please file the above documents and return a letter of acknowledgement to Christine Peterson at the address listed on the Cover Letter. If you have any questions or need additional information, please contact me directly at (800) 775-8584.

Sincerely,

A handwritten signature in black ink, appearing to read 'Michael R. Epperly', is written over a horizontal line.

Michael R. Epperly  
Legal Counsel  
Risk Management Associates, Inc.

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Risk Management Associates, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christine Peterson, Executive Vice President & Secretary

Name of Person

Risk Management Associates, Inc.

Firm/Company

4000 Westchase Blvd., Suite 350

Address

Raleigh, NC 27607

City/State and Zip code

cpeterson@rmasecurity.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Epperly, Esq.

Name of Person

at ( 919 ) 834-8584

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:



\$70.00 Filing Fee



\$78.75 Filing Fee &  
Certificate of Status



\$78.75 Filing Fee &  
Certified Copy



\$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Risk Management Associates, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

RMA Security, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Carolina

(State or country under the law of which it is incorporated)

3. 561675471

(FBI number, if applicable)

4. November 3, 1989

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

(Principal office address)

4000 Westchase Blvd., Suite 350, Raleigh NC 27607

(Current mailing address)

8. Investigative and Security Consulting Services

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 515 East Park Avenue

Tallahassee, Florida 32301

(City)

(Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

NRAI Services, Inc

By: [Signature]

Wendy D Rea, Assistant Secretary

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: William F. Booth

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: Michael K. Tucker

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Director: Michael R. Longmire

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

[SEE ATTACHMENT]

**B. OFFICERS**

President: Michael R. Longmire, President & CEO

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Vice President: Jerry T. Blanchard, Senior Vice President

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Secretary: Christine Peterson, Executive Vice President & Secretary/Treasurer

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Michael R. Longmire, President & CEO

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

## ATTACHMENT

(Application of Risk Management Associates, Inc. for Authority to Transact Business in Florida)

### 12. Names and business addresses of officers and directors:

#### A. DIRECTORS (continued)

Director: Jerry T. Blanchard

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

Director: Christine L. Peterson

Address: 4000 Westchase Blvd., Suite 350, Raleigh NC 27607

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TALLAHASSEE, FLORIDA



# NORTH CAROLINA

## Department of The Secretary of State

### CERTIFICATE OF EXISTENCE

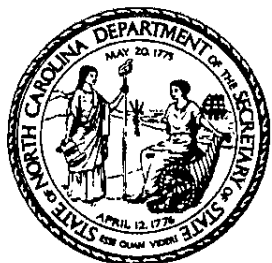
I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### **RISK MANAGEMENT ASSOCIATES, INC.**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 3rd day of November, 1989, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of February, 2011.

*Elaine F. Marshall*

Secretary of State



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN  
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Michael R. Longmire, do hereby certify  
(Name)

that this Resolution of the Board of Directors of \_\_\_\_\_

Risk Management Associates, Inc.  
(Name of Corporation)

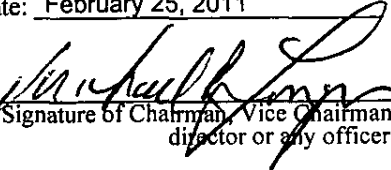
a corporation duly organized and existing under the laws of North Carolina,  
(State or Country)

was adopted on February 25, 2011, adopting the alternate

name of RMA Security, Inc.  
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: February 25, 2011

  
Signature of Chairman, Vice Chairman of the Board, a  
director or any officer

President & CEO  
Title of person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314